

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
First State PAC

A. Full Name (Last, First, Middle Initial) John Bocchieri for Congress Mailing Address PO BOX 3016	Transaction ID: D377685 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 9</div> </div>
City Alliance State OH Zip Code 44601 Purpose of Disbursement Void of 10/08 Check <input type="checkbox"/> Candidate Name John A. Bocchieri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 16	Amount of Each Disbursement this Period <div>-3000.00</div>
B. Full Name (Last, First, Middle Initial) Friends for Harry Reid Mailing Address PO Box 19163 City Las Vegas State NV Zip Code 89132 Purpose of Disbursement Contribution <input type="checkbox"/> Candidate Name Harry Reid Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District:	Transaction ID: D372645 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>5000.00</div>
C. Full Name (Last, First, Middle Initial) Friends of Barbara Boxer Mailing Address PO Box 411176 City Los Angeles State CA Zip Code 90041 Purpose of Disbursement Contribution <input type="checkbox"/> Candidate Name Barbara Boxer Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District:	Transaction ID: D377405 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>2500.00</div>

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)